DOCUMENT RESUME

ED 355 197 SP 034 290

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TITLE	Integrated Services: New Roles for Schools, New Challenges for Teacher Education. ERIC Digest.
INSTITUTION	ERIC Clearinghouse on Teacher Education, Washington, D.C.
SPONS AGENCY	Office of Educational Research and Improvement (ED), Washington, DC.
REPORT NO	EDO-SP-92-3
PUB DATE	Feb 93
CONTRACT	RI88062015
NOTE	4p.
PUB TYPE	
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	*Agency Cooperation; Coordination; *Educational Environment; Elementary Secondary Education; Family School Relationship; Health Needs; *High Risk Students; Holistic Approach; *School Role; Social Services; Student Needs; Student Welfare; *Teacher Education Curriculum; Teacher Role
IDENTIFIERS	ERIC Digests; *Integrated Services

ABSTRACT

Integrated services is a coordinated, holistic approach to addressing children's needs, particularly the needs of at-risk children, in which the school is the hub of a network of service providers and a link between these service providers and children and their families. The focus is on wellness and prevention; the programs provide a comprehensive range of education and human services to help children overcome barriers to academic success. Integrated services programs may be school-based or school-linked. Examples of services may include tutoring and remediation, job counseling, medical services, mental health counseling, drop-out prevention, recreation, and services for homeless youth. The argument for this approach to meeting children's needs rests on six basic premises: that (1) all facets of a child's well-being impact on his or her potential for academic success; (2) an increasing number of American school-age children can be considered at risk for failure; (3) prevention is more cost-effective than correction or remediation; (4) at-risk children, come to school with multiple problems that cut across conventional health, social, and education systems boundaries; (5) current child-delivery services are fragmented and uncoordinated; and (6) because schools have sustained long-term contact with the majority of children, they are the logical gateway for providing multiple services to children. Although various integrated service models exist, successful programs share many of the same characteristics. They are family-focused, prevention-oriented, community-centered, and responsive to local needs; they offer a continuum of services; they avoid duplication and gaps, and they enable personal relationships to exist between families and staff. These programs bring with them various implications for teacher education, for example: teachers need to be trained to identify students who need intervention, to take part in the collaborative process; and to view themselves as part of a team effort to address the academic social, and health development of students. (IAH)

ED355197

ERIC DIGEST

INTEGRATED SERVICES: NEW ROLES FOR SCHOOLS, NEW CHALLENGES FOR TEACHER EDUCATION

by

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ERIC CLEARINGHOUSE ON TEACHER EDUCATION

Integrated Services: New Roles for Schools, New Challenges for Teacher Education

Ismat Abdal-Haqq

Integrated services (IS) is a coordinated, holistic approach to addressing the needs of children—particularly the complex, interrelated problems of at-risk children—by providing a comprehensive range of educational and human services. In these programs, schools are the hub of a coordinated network of service providers and the link between these service providers and children and their families. School-linked IS programs focus on prevention, promoting wellness for children and their families, and providing services that overcome barriers to school readiness and academic success (Center for Research, 1992). These services include drug abuse counseling, gang-diversion programs, health care, teen pregnancy counseling, job training and counseling, tutoring and remedial education, mentoring, drop-out prevention, after-school care, literacy training, parent education, mental health services, child abuse programs, recreation, programs to reduce intergroup tensions and student conflict, and programs for homeless youth ("Evaluation in a Sample," 1992).

Target Population

Most integrated services programs target at-risk youth, children who have a high probability of not receiving sufficient education to become independent, successful, and productive adults (Center for the Study, 1992). Children considered at risk include: children of migrant workers, adjudicated youth, limited-English-speaking youth, pregnant minors, children in single-parent families, children who live in poverty, children with a record of poor attendance or behavior problems, abused children, and homeless children ("Evaluation in a Sample," 1992; Olenick & McCroskey, 1992).

Rationale

The argument for implementing school-linked integrated services rests on six basic premises.

1. All facets of a child's well-being impact on his or her potential for academic success. (Kirst, 1990).

2. Demographic trends indicate that an increasing number of American school-age children can be considered at-risk for school failure and other social problems such as drug abuse and incarceration (Hodgkinson, 1989; Usdan, 1990).

3. Prevention is more cost-effective for society than correction or remediation. For example, Hodgkinson (1989) reports that there is an established relationship between dropping out of school and the probability of committing a crime and that drop-out prevention is cheaper in the long run than the cost of incarceration.

4. At-risk children come to school with multiple problems that cut across conventional health, social, and education systems boundaries—problems that schools are ill-equipped to handle alone (Kirst, 1990).

5. The current system of child-related service delivery is fragmented, often characterized by duplication, waste, and lack of coordination. Consequently, many children fall through the cracks and don't get the services they need (Kirst, 1990).

6. Because schools have sustained, long-term contact with the majority of children, they are the logical gateway for providing multiple services to children (Kirst, 1990).

Characteristics

There is no one model for school-linked integrated services programs. Some programs are school-based, with services delivered on-site by school personnel, while other programs provide services at community agencies, human services offices, churches, or in the student's home. However, model programs are family-focused, prevention-oriented, community-centered, and responsive to local needs. In addition, they offer a comprehensive continuum of services; they avoid duplication and gaps in services through communication and collaboration among service providers; and they are designed so that each child and family has a personal relationship with program staff (Robinson, 1990). Successful programs are also characterized by shared governance, collaborative funding and planning, ownership by the school, redefined school faculty roles, establishment of a case manager position, gradual phase-in of program components, and extensive training and staff development (Center for Research, 1992; Pollard, 1990).

Problematic Issues

Collaboration and coordination among educational and human services providers are the cornerstones of successful school-linked integrated services programs. However, state and federal regulations often impose confidentiality requirements that block the sharing of information among service providers. There are many school professionals and others who believe that involvement in social service delivery will overburden the schools and divert time and resources from the schools' primary mission ("Analysis," 1992; Ooms & Owens, 1991).

School-based or school-linked services may not be the most viable approach for some students and their families. In many communities schools are not viewed as sympathetic to the interests and concerns of local residents. Many of the neediest youth are drop-outs who no longer have regular contact with any school. The existence of magnet schools and busing often means that a needy child's school is not conveniently located for family visits or after-school activities. For those who are unable or unwilling to utilize school-linked services, multiple

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access points to social services are needed (Chaskin & Richman, 1992).

Implications for Teacher Education

Teachers need to be trained to identify students who need intervention; to handle problems in the classroom; to locate sources of help for students; to take part in the collaborative process; and to view themselves as part of a team effort to address the academic, social, and health development of students (Center for Research, 1992; Bucci & Reitzammer, 1992). At present, integrated services-related teacher education consists primarily of inservice workshops. Robinson and Mastny (1989) recommend interdisciplinary training at the preservice level. To implement these kinds of programs, higher education institutions will need to restructure their professional programs in ways that facilitate interprofessional training since professional schools have traditionally operated in isolation from one another (*The Health/Education Connection*, 1990; Kirst, 1990).

However, the growing interest in school-linked integrated services has stimulated teacher educators to initiate programs to remedy this situation. For example, Ohio State University (Columbus) has developed a project to promote interprofessional training: the Commission on Interprofessional Education and Practice. The American Association of Colleges for Teacher Education recently received a $1.4 million grant from the DeWitt Wallace-Reader's Digest Fund to establish a 3-year demonstration project to facilitate incorporation of health and human services training into teacher education programs. The four sites that were funded are Jackson State University (Mississippi), University of Louisville (Kentucky), University of New Mexico (Albuquerque), and University of Washington (Seattle) (Snider, 1992).

References

References identified with an EJ or ED number have been abstracted and are in the ERIC database. Journal articles (EJ) should be available at most research libraries; documents (ED) are available in ERIC microfiche collections at more than 700 locations. Documents can also be ordered through the ERIC Document Reproduction Service: (800) 443-ERIC. References followed by an SP number were being processed for the ERIC database at the time of publication. For more information contact the ERIC Clearinghouse on Teacher Education, One Dupont Circle, NW, Suite 610, Washington, DC 20036-1186; (202) 293-2450.

Analysis. (1992). *The Future of Children*, *2*(1), 6-18.

Bucci, J. A., & Reitzammer, A. F. (1992). Collaboration with health and social service professionals: Preparing teachers for new roles. *Journal of Teacher Education*, *43*(4), 290-295.

Center for Research on Effective Schooling for Disadvantaged Students. Johns Hopkins University. (1992, July). Integrate services to remove barriers. *CDC*, p. 11.

Center for the Study and Teaching of At-Risk Students. University of Washington. (1992). *The interprofessional case management guidelines being demonstrated under USDOE grant no. S201C12560 entitled "Washington State Coordinated Service Initiative for At-Risk Youth and Families"* (CFDA No. 84.201C). Seattle, WA: Author.

Chaskin, R., & Richman, H. A. (1992). Concerns about school-linked services: Institution-based versus community-based models. *The Future of Children*, *2*(1), 107-117.

Evaluation in a sample of current school-linked service efforts. Appendix B. (1992). *The Future of Children*, *2*(1), 135-144.

The health/education connection: Initiating dialog on integrated services to children at risk and their families. Symposium. (1990, March). Washington, DC: American Association of Colleges for Teacher Education; American Academy of Pediatrics; and Maternal and Child Health Bureau, U.S. Department of Health and Human Services.

Hodgkinson, H. L. (1989). *The same client: The demographics of education and service delivery systems*. Washington, DC: Institute for Educational Leadership. ED 312757

Kirst, M. W. (1990, April). *Improving children's services: Overcoming barriers, creating new opportunities*. Paper presented at the annual meeting of the American Educational Research Association, Boston.

Olenick, M., & McCroskey, J. (1992). *Social and health services in Los Angeles County Schools: Countywide data on availability, need and funding*. Los Angeles: Los Angeles Roundtable for Children & Los Angeles County Office of Education.

Ooms, T., & Owen, T. (1991). *Promoting adolescent health and well-being through school-linked, multi-service, family-friendly programs*. Washington, DC: American Association for Marriage and Family Therapy, Research and Education Foundation. SP 033956

Pollard, J. S. (1990, May). School-linked services--So that schools can educate & children can learn. Part 1. *Insights on Educational Policy and Practice No. 20*, p. 1-4.

Robinson, E. R., & Mastny, A. Y. (1989). *Linking schools & community services. A practical guide*. Newark, NJ: Center for Community Education, School of Social Work, Rutgers, The State University of New Jersey. ED 318929

Robinson, S. (1990). *Putting the pieces together: Survey of state systems for children in crisis*. Denver, CO: National Conference of State Legislatures.

Snider, K. (1992, November 30). Sites selected for comprehensive services project. *AACTE Briefs*, *13*(18), p. 1, 7.

Usdan, M. (1990). Restructuring American educational systems and programs to accommodate a new health agenda for youth. *Journal of School Health*, *60*(4), 139-141.

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OERI This publication was prepared with funding from the Office of Educational Research and Improvement, U. S. Department of Education, under contract number RI 88062015. The opinions expressed in this report do not necessarily reflect the positions or policies of OERI or the Department.

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